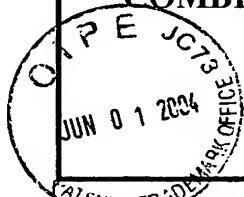


<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 C.F.R. 1.63)</b> <b>COMBINED WITH POWER OF ATTORNEY</b>	Attorney Docket No.	9331M
	First Named Inventor	Wang (nmn) Ping
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10/780,365
	Filing Date	February 17, 2004
	Group Art Unit	
Examiner Name		
Confirmation Number		



I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled ELECTRIC TOOTHBRUSH HAVING MOVABLE, INTERMITTENTLY MOVABLE, AND STATIONARY BRISTLES

the specification of which

(check one) ☐ ☒

is attached hereto.

was filed on 02/17/2004 as United States

Application No. or PCT International Application Serial No. 10/780,365

and was amended on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

I hereby appoint Practitioners at Customer Number 27752 as my/our attorneys(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Direct all correspondence to Customer Number 27752.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>NAME OF SOLE OR FIRST INVENTOR:</b>			
Given Name (first and middle [if any]) Wang (nmn)		Family Name Or Surname Ping	
Inventor's Signature <u>Wang Ping</u>		Date <u>March 16th, 2004</u>	
Residence: City Beijing	State	Country P.R. China	Citizenship P.R. China
Mailing Address: Room 608 7 <sup>th</sup> Building Qian He Jia Yuan, 108, Beisihuan East Road,			
City Beijing	State	Zip (or Postal Code) 100029	Country PR China

**DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION**

(continued)

Attorney Docket No. 9331M

JUN 01 2004

**NAME OF SECOND INVENTOR:**Given Name John Geoffrey  
(first and middle [if any])Family Name Chan  
Or Surname

Inventor's Signature

John G. Chan

Date

3/25/04

Residence: City Loveland State OH

Country US

Citizenship US Citizen

Mailing Address: 3574 Spring Lake Circle

City Loveland

State OH

Zip (or Postal Code) 45140

Country US

**NAME OF THIRD INVENTOR:**Given Name  
(first and middle [if any])Family Name  
Or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address:

City

State

Zip (or Postal Code)

Country

**NAME OF FOURTH INVENTOR:**Given Name  
(first and middle [if any])Family Name  
Or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address:

City

State

Zip (or Postal Code)

Country

**NAME OF FIFTH INVENTOR:**Given Name  
(first and middle [if any])Family Name  
Or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address:

City

State

Zip (or Postal Code)

Country